IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

	F ATTORNEY WITH REVOCATION AND E OF CORRESPONDENCE ADDRESS
I hereby appoint:	E OF CORREST ONDENCE ADDRESS
prosecute the applications ic	Customer Number: 55255 as my/our attorney(s) or agent(s) to dentified in the attached Table A, and to transact all business and Trademark Office connected with said applications.
Address all telephone calls a	and correspondence to:
	Lisa E. Alexander Sagres Discovery, Inc. c/o Chiron Corporation P.O. Box 8097 Emeryville, CA 94662-8097 Telephone: (510) 923-2585
I am the:	
☐ Applicant/Invente	or.
Assignee of record enclosed.)	rd of the entire interest. (A statement under 37 CFR 3.73(b) is
Signature of Applicant or A	Assignee of Record
	Respectfully submitted,
	SAGRES DISCOVERY, INC.
Date: 24 August 2005	By: Ma Alexander Name: Lisa E. Alexander
	Name: Lisa E. Alexander Title: Assistant Secretary